

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

8678

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24. Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name Frisch'S				Telephone Number 812-948-1972	Date of Ins (mm/dd/yr	
Establishment Address (number and street, city, state, zip code)					5/24	119 18-
804 Hausfeldt Ln New Albary IN 47150				5/3-961-2660		199
Owner	356	'n	Restaurant	Purpose:	Follow-u	امدا
Owner's Address				1. Routine	<u> NO</u>	
280	0 6	15	ort Ave Cincinati, OH 45206	2. Follow-up 3. Complaint	Summary	of Violations;
Person in C	Charge	Uù	lian Johnson	4. Pre-Operational	c <u>2</u> 2	NC R
Responsible				5. Temporary	Menu Tv	pe (See back of page)
	-	-		6. HACCP		
Certified F	ood Mana _i	ger _	ogan Nicoulin 10-10-22	7. Other (list)	12	3 V ₄₅
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"						
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"						
Section#	C/NC	R	Narrative			To Be Corrected By
		_	Fold recieved a complain	L about some	<u>, </u>	
	Find recieved a complaint about some Smells, buffet temps, stacks of dirty dicher.					
,	discolored pineapple, foriegn object in					
			Food-	<u>,</u>	-	
	- PIC said odor was from back-up in mopsint.					
	- Plunbing was repaired / corrected.					
		- Could not confirm any complaints.				
		Inspection was limited to complaints that				
	Inspection was limited to complaints that were made.					
			·			
				<u> </u>		

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Received by (name and title printed): Inspected by (name and title printed):						
Vivian Johnson General Manager Thomas Suider, EHS						
Received by (signature): Inspected by (signature):						
Wear offman Shinz Brisk						
cc: cc:						
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